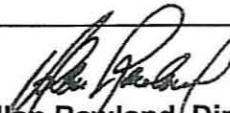


**County of San Bernardino  
Department of Behavioral Health**

**SAMHSA Block Grant- Annual Program Review Procedure**

Effective Date 4/18/07  
Revision Date 5/2/07

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Allan Rawland, Director

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**Purpose** To inform Department of Behavioral Health staff of the requirement for an Annual Program Review as required by the State Department of Mental Health.

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**Background** The Substance Abuse and Mental Health Services Administration (SAMHSA) Block Grants are federally awarded monies allocated to establish or expand community-based systems of care. The community-based systems of care must provide mental health services to adults with serious mental illness (SMI) and children with serious emotional disturbances (SED).

The Department of Mental Health (DMH) allocates the Block Grant to counties, who as sub-recipients, must comply with specific requirements. The Annual Program Review is designed as a means to responsibly monitor sub-recipient's activities and provide reasonable assurance that the sub-recipient administrators remain in compliance with Federal requirements.

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**Annual  
Program  
Review  
Process**

The Process for the Annual Program Review is as follows:

- Each sub-recipient must partake in an annual review during the same Federal Fiscal Year that monies are received. The annual review will comprise of a formal visit to the sub-recipient agency and an assessment of compliance as outlined against the SAMHSA- [Mental Health and Alcohol and Drug Services Agency Evaluation](#).
  - Following the initial audit, the sub-recipient will receive a copy of the audit tool and report results. Should the audit find areas needing improvement or issues of noncompliance, the sub-recipient will be required to propose corrective remediation along with proposed dates of correction.
  - The Department of Behavioral Health will then follow-up to verify that corrections have been made.
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**Schedule for  
Annual Review  
Process**

All phases of the annual review process should begin and be completed within the same Fiscal Year, including taking any corrective actions. The Fiscal Year begins July 1<sup>st</sup> and continues through June 30<sup>th</sup>.

Below is the Schedule for the Annual Review Process:

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Date	Action
July 1- July 30	Copy of the Mental Health and Alcohol and Drug Services Agency Evaluation provided to the sub-recipient
July 1- Nov 30	Initial sub-recipient audit scheduled and conducted
No later than Jan 30	Copy of the Mental health and Alcohol and Drug Services Agency Evaluation results along with narrative report findings submitted to sub-recipient
March 31	Sub-recipient statement of corrective actions along with completion dates due
No later than June 15	Verification that all items of correction are in compliance according to corrective action agreement.

### Sub-recipient Notification of Grant Requirements

Each Fiscal Year, the sub-recipient should receive a copy of the Mental Health and Alcohol and Drug Services Agency Evaluation in order to be aware of areas to be audited and program requirements. The following steps should be taken:

Step	Action
1	Send each sub-recipient the Mental Health and Alcohol and Drug Services Agency Evaluation upon SAMHSA contractual renewal.
2	Document the date sent.  *Should the evaluation be faxed or emailed to sub-recipient, keep documentation on file of date sent and/or receipt of document.

### The Review

The Annual Review can be done as early as July 1<sup>st</sup> but may be done as late as Nov 30<sup>th</sup>; however, the interviewer conducting the review should make every effort to conduct the review as early as possible to allow sub-recipients ample time to take corrective remedial actions.

- Audits may be conducted by Department of Behavioral Health supervisory and/ or lead staff

Below are the steps in the Annual Review process:

Step	Action
1	During the interview, interviewer must utilize and complete the Mental Health and Alcohol and Drug Services Agency Evaluation.

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	Based on the Evaluation, the interviewer is required to complete the Agency Evaluation Summary as follows: <ul style="list-style-type: none"> <li>• All findings of “needing action” or requiring “immediate action” must be explained in the summary</li> <li>• Outcome Measurements must be those as listed in the SAMHSA Application/ Renewal Application</li> <li>• Results must be quantitatively measured against the original SAMHSA Application/ Renew Application Outcome Measures</li> </ul>
3	A copy of the Mental Health and Alcohol and Drug Services Agency Evaluation along with the Agency Evaluation Summary must be sent to the Program Manager II no later than Nov 30 <sup>th</sup> .
4	Program Manager II, or designee, will keep the original Mental Health and Alcohol and Drug Services Agency Evaluation and Agency Evaluation Summary on file and send copies to the sub-recipient requesting a corrective remediation plan along with projected correction dates. <ul style="list-style-type: none"> <li>• Notify sub-recipient of Response for Corrective Remediation due date- <i>no later than March 31</i></li> </ul>
5	Log the date that copies of the Evaluation and Evaluation Summary are sent to sub-recipient

### Sub-recipient Response

Upon receipt of Annual Review Results, sub-recipient must respond with a corrective remedial plan that includes projected completion dates.

Below are the steps to be taken:

Step	Action
1	Program Manager, or designee, will log response and notate projected completion dates.
2	Projected due dates must be tracked and a follow-up review must be conducted prior to the end of the Federal Fiscal Year.

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3	<b>If</b>	<b>Then</b>
	All corrections have been made prior to the end of the Federal Fiscal Year	Supply sub-recipient with Acknowledgment of Full Compliance
	Only partial corrections made prior to the end of the Federal Fiscal Year, but Corrective Plan requested an extended timeframe to comply	Supply sub-recipient with Acknowledgment of Extension for Remedial Corrective Action. List areas where corrections were made and are now in compliance, and areas still needing action with extended timeframe allowed
	Only partial corrections made prior to the end of the Federal Fiscal Year and Corrective Plan does not identify an extended date	Supply sub-recipient Partial Compliance Acknowledgment listing areas where corrections were made and areas still needing action. Give sub-recipient, in writing, 30 days to come into compliance
	No corrections are made prior to the end of the Federal Fiscal Year	Send Non-Compliance Letter listing areas of non-compliance and corrective action due dates. Give sub-recipient, in writing, 30 days to come into compliance
4	Conduct follow-up at the end of the extended timeframe or at the end of the 30-day period. Document results.	

### Ongoing Correspondence and Documentation

Program Managers should ensure that all correspondence and on-going meetings throughout the year, between DBH and sub-recipients, are documented. Copies of such correspondence and meetings should also be electronically sent to the SAMSHA Coordinator.

### References

SAMHSA Letter No.: 06-02  
March 2004 OMB Circular A-133 Compliance Supplement  
Title XIX Part B of the Public Health Service Act